

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail**

10-01-04  
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

27652 7590 07/02/2004

JOSHUA D. ISENBERG  
 204 CASTRO LANE  
 FREMONT, CA 94539

10/04/2004 HDEMESS2 00000072 09751660

01 FC:1501 1330.00 OP  
 02 FC:1504 300.00 OP



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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

|                    |
|--------------------|
| (Depositor's name) |
| (Signature)        |
| (Date)             |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/751,660      | 12/28/2000  | Behrang Behin        | ONX-105             | 8890             |

TITLE OF INVENTION: TWO-DIMENSIONAL GIMBALED SCANNING ACTUATOR WITH VERTICAL ELECTROSTATIC COMB-DRIVE FOR ACTUATION AND/OR SENSING

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO           | \$1330    | \$300           | \$1630           | 10/04/2004 |

| EXAMINER      | ART UNIT | CLASS-SUBCLASS |
|---------------|----------|----------------|
| ROJAS, OMAR R | 2874     | 385-018000     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. JDI PATENT  
 2. Joshua D. Isenberg  
 3.

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Analog Devices, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Norwood, MA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

☒ Issue Fee

☐ A check in the amount of the fee(s) is enclosed.

☒ Publication Fee

☒ Payment by credit card. Form PTO-2038 is attached.

☐ Advance Order - # of Copies \_\_\_\_\_

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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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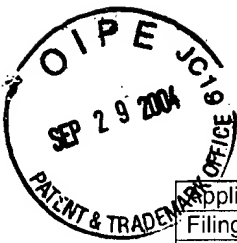


|  |  |             |
|--|--|-------------|
| <b>TRANSMITTAL<br/>FORM</b><br><br>(for all correspondence after initial filing) | Attorney Docket No. <b>ONX-105</b>           | Total Pages |
|  | Application Number<br><b>09/751,660</b>      |             |
|  | Filing Date<br><b>DECEMBER 28, 2000</b>      |             |
|  | First Named Inventor<br><b>BEHRANG BEHIN</b> |             |
|  | Group Art Unit<br><b>2874</b>                |             |
|  | Examiner<br><b>OMAR R. ROJAS</b>             |             |

| ENCLOSURES (check all that apply)   |  |
|---|--|
| <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)                    | <input type="checkbox"/> Response to Notice of Missing Parts         |
| <input checked="" type="checkbox"/> Fee Transmittal Form                                  | <input checked="" type="checkbox"/> Issue Fee Transmittal PTOL-85    |
| <input checked="" type="checkbox"/> Fee Attached  | <input type="checkbox"/> Assignment papers                           |
| <input type="checkbox"/> Response/Amendment   | <input type="checkbox"/> Power of Attorney by Assignee               |
| <input type="checkbox"/> After Final Rejection  | <input type="checkbox"/> IDS/PTO-1449                                |
| <input type="checkbox"/> After Allowance communication to Group                           | <input type="checkbox"/> with copies of cited references             |
| <input type="checkbox"/> with Corrected Drawing(s) Total Sheets: <input type="checkbox"/> | <input type="checkbox"/> New Power of Attorney and Revocation of Old |
| <input type="checkbox"/> with Affidavits/Declarations                                     | <input type="checkbox"/> Change of Correspondence Address            |
| <input type="checkbox"/> Extension of Time Request  | <input type="checkbox"/> Other:                                      |
| <input type="checkbox"/> Express Abandonment Request                                      |  |

| SIGNATURE OF AGENT |  |
|--------------------|--|
| NAME               | <b>JOSHUA D. ISENBERG, REG. NO. 41,088</b> |
| Signature          | <i>Joshua D. Isenberg</i>                  |
| Date               | <b>9/29/2004</b>                           |

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| <i>Bing Li</i><br>SIGNATURE  | DATE OF MAILING: SEPTEMBER 29, 2004    |
| BING LI<br>NAME OF PERSON SIGNING  | EXPRESS MAIL LABEL NO: ED 047416978 US |



## FEE TRANSMITTAL

|                       |  |
|-----------------------|--|
| Application Number:   | 09/751,660   |
| Filing Date:          | December 28, 2000  |
| First Named Inventor: | Behrang Behin  |
| Title of Invention:   | TWO-DIMENSIONAL GIMBALED SCANNING ACTUATOR WITH VERTICAL ELECTROSTATIC COMB-DRIVE FOR ACTUATION AND/OR SENSING |
| Group Art Unit:       | 2874   |
| Examiner:             | Omar R. Rojas  |
| Agent's Docket No.:   | ONX-105  |

## Fee Calculation:

for ☒ Large Entity / ☐ Small Entity.

## Basic Billing Fee:

|  |               |    |
|--|---------------|----|
| <input type="checkbox"/> Utility Patent Application:     | \$770 / \$385 | \$ |
| <input type="checkbox"/> Provisional Patent Application: | \$160 / \$80  | \$ |

## Claims:

|   |                 |    |
|---|-----------------|----|
| <input type="checkbox"/> Number of Total Claims Over 20: <input type="checkbox"/>   | x \$18 / \$9 =  | \$ |
| <input type="checkbox"/> No. of Independent Claims Over 3: <input type="checkbox"/> | x \$86 / \$43 = | \$ |

## Other Fees:

|   |                |         |
|---|----------------|---------|
| <input type="checkbox"/> Extension of time, 1 month                                 | \$110 / \$55   | \$      |
| <input type="checkbox"/> Extension of time, 2 months                                | \$420 / \$210  | \$      |
| <input type="checkbox"/> Extension of time, 3 months                                | \$950 / \$475  | \$      |
| <input type="checkbox"/> Extension of time, 4 months                                | \$1480 / \$740 | \$      |
| <input type="checkbox"/> Missing Parts Surcharge (Regular Application)              | \$130 / \$65   | \$      |
| <input type="checkbox"/> Missing Parts Surcharge (Provisional Application)          | \$50 / \$25    | \$      |
| <input type="checkbox"/> Recordation of Assignment Document                         | \$40           | \$      |
| <input checked="" type="checkbox"/> Issue Fee                                       | \$1330 / \$665 | \$ 1330 |
| <input checked="" type="checkbox"/> Publication Fee                                 | \$300          | \$ 300  |
| <input type="checkbox"/> Printed Patent; Number of Copies: <input type="checkbox"/> | x \$3 =        | \$      |

**TOTAL PAYMENT:** \$1630

## Method of Payment:

☒ Payment Enclosed☒ Credit Card Payment Form (PTO-2038 for \$1330)

## Signature of Applicant, Attorney, or Agent

Joshua D. Isenberg  
Joshua D. Isenberg, Reg. No. 41,088

9/29/2004  
Date

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